302 FOURTH BIENNIAL REPORT STATE BOARD OF CONTROL

thrown the burden of meeting a deficit upon the state. This has been done by an appropriation creating a revolving fund, which receives the income from all sources and from which all payments are made. In order to make it possible for the institution to comply with the law in both these particulars, it is necessary to enlarge its capacity and increase its facilities for caring for the sick. No institution can be economically conducted in quarters poorly adapted to the requirements of the work that must be done. The results are unsatisfactory and the method extravagant. This is the case with the conditions at present existing at the sanatorium at Walker, as will be seen from the particulars as follows.

Therefore we earnestly recommend that an administration building be erected in accordance with the original plans as drawn by Mr. Clarence Johnston. This will give office room, operating room, examining room, throat room, and housekeeper's office, all of which departments are at the present time either entirely missing or are crowded into one small room. It will provide a commodious dining room, kitchen and laundry such as the institution needs. At present the temporary kitchen is in the cellar. There is no laundry worthy of the name, as it is entirely devoid of any machinery. There is no place for the male help to sleep, and it was necessary to partition off an end of the temporary dining room as a sleeping place for the women help. All of these things will be properly provided in the administration building, also a power house, cold storage room and a store room for supplies. None of these latter conveniences are at present in existence. The new administration building will make it possible to use two wards, which are now serving in other capacities for patients The one is now used as a dining room, the other as living quarters for members of the staff. This will increase the capacity of the institution by twenty-eight beds, which can readily be still further increased by the construction of more shacks.

There is still great need of work on the grounds, much clearing and grading must be done. Clearing is necessary to allow a better circulation of air in the summer months, and to provide pastures for the dairy herd, that must some day be owned by the institution. A barn is also necessary as the possibilities for farming and gardening are gradually expanding. In order to meet these requirements, appropriations of one hundred and twenty-five thousand dollars, (\$125,000) for building and equipping the main building; fifteen thousand dollars (\$15,000) for building and equipping additional shacks, and ten thousand dollars (\$10,000) for a barn, for the purchase of stock, for the clearing and grading of land and filter beds for the sewage from the septic tank, should be secured. It would probably be better for the legislature to make a lump appropriation of one hundred and fifty thousand dollars (\$150,000) for buildings, equipment and improving the property, and fifty thousand dollars (\$50,000) for the revolving fund for two years.

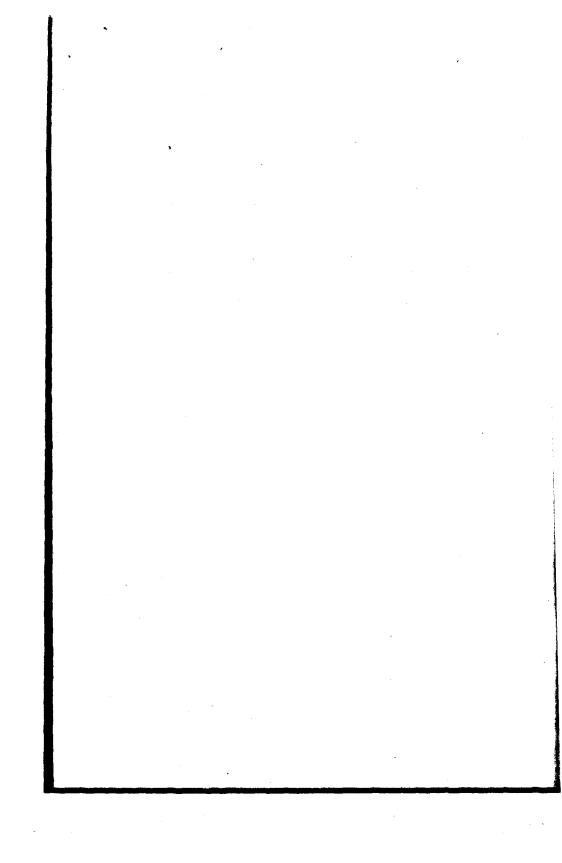
All of which is very respectfully submitted.

G. S. WATTAM,
Secretary.
H. L. TAYLOR,
Chairman.





STATE HOSPITAL FOR CRIPPLED AND DEFORMED CHILDREN.



State Hospital for Crippled and Deformed Children

REPORT OF SUPERINTENDENT.

To the State Board of Control.

Dear Sirs: Herewith is respectfully submitted the report of the State hospital for Crippled and Deformed Children, with statistics of the patients in the hospital, November 30, 1908, together with additional statistics affecting the institution since its organization.

To any one who has been at pains to familiarize himself with the conditions existing at this institution, there can be no question of its incalculable benefit to the state, nor of the splendid service rendered by those having charge of the care and treatment of these little unfortunates. I desire to call your attention especially to the services of Dr. Arthur J. Gillette, surgeon in charge; to our matron, Mary A. Edwards, who have done so much for their care, happiness and comfort. The Board of Control of this city and county has been most faithful in the performance of its contract with the state. During the time this department has been maintained in connection with the City and County Hospital it has expended many thousands of dollars in the improvement of the buildings; yet they are still inadequate to meet the demands made upon them. Two years ago the City of St. Paul and County of Ramsey transferred to the State of Minnesota several acres of ground, together with two buildings for the use of this department. The property east of the hospital included in the deed making the transfer would make a site for a hospital devoted to these purposes that would have no equal in the United States. I would respectfully recommend that your Honorable Board take steps to secure an appropriation for the erection of a new building on this site. I would further make the recommendation, and the advisability of its favorable consideration cannot be questioned, of the razing and removal of the old building, known as the maternity ward. It has no particular use and it occupies a site that can be used as a playground. It is furthermore a menace to the other buildings.

Assuring you of my appreciation and the courteous consideration which I have received at your hands, I am.

Yours very truly,

ARTHUR B. ANCKER, Superintendent.

STATISTICAL TABLES.

NUMBER	\mathbf{OF}	PATIE	INTS	RECEIVED	INTO	HOSPITA	L FO	R TREATM	1ENT
SINCE	DA'	re of	FIRST	ADMISSIC	N, OC	COBER 27,	1897,	TO NOVEM	IBER

SINCE DATE OF FIRST ADMISSION, OCTO	BER 27, 18	97, TO NOV	EMBER
30, 1908. Year.	35-1-		M-4-1
1897	Male.	Female.	Total.
1898	15	2 14	3 29
1899		11	29
1900		13	, 30
1901		21	44
1902	23	8	31
1903		22	. 41
1904	25	20	45
1905	28	25	53
1906	30	20	50
1907	35	21	56
1908		19	50
,			
Total to date	265	196	461
AGE AT TIME OF ADMI	SSION.		
	Male.	Female.	Total.
Under 1 year		6	11
Over 1 year and under 2 years	12	9	21
Over 2 years and under 3 years	24	14	38
Over 3 years and under 4 years	26	21	47
Over 4 years and under 5 years	16	18	34
Over 5 years and under 6 years		8	26
Over 6 years and under 7 years		9	20
Over 7 years and under 8 years	21	10	31
Over 8 years and under 9 years	17	6	23
Over 9 years and under 10 years	24	15	39
Over 10 years and under 11 years	11	10	21 .
Over 11 years and under 12 years	12	11	23
Over 12 years and under 13 years	22	16	38
Over 13 years and under 14 years	10	12	22
Over 14 years and under 15 years	13	13	26
Over 15 years and under 16 years	12	13	25
Over 16 years and under 17 years	6	4	10
Over 17 years and under 18 years	3	1	4
Over 18 years and under 19 years	1		1
Over 20 years	1	<u> </u>	_1
Total	265	196	461
NUMBER OF PATIENTS DISCHARGED FROM NOVEMBER 30, 190		ER 27, 1897,	то
Males	199		
Females			
Total	—	353	
NUMBER OF DEATHS DURING	SAME PER	HOD.	
			•
Males Females	22 12		
Total		34	
		DOWNER	-
NUMBER REMAINING UNDER TREATME		ESENT TIM	E.,
Males Females			
Total		74	461

TOTAL NUMBER WHO HAVE BEEN UNDER TREATMENT.

265 196

461





STATE HOSPITAL FOR CRIPPLED AND DEFORMED CHILDREN.

RESULTS.

Discharged weil Discharged improved Discharged unimproved Died Remaining under treatment November 30, 1908.	205 130 18 34 74
Total	

Of those discharged "unimproved," the majority were taken away by parents under protest, and in some cases without undergoing any operation.

Average number of days in hospital of patients discharged and died, 377 days.

CAUSE OF DEATHS.

Tubercular meningitis General tuberculosis Tuberculosis and multiple abscesses. Tubercular adenitis Potts disease Potts disease and complications Potts disease of spine, amyloid kidneys and general tuberculosis. Pneumonia Diphtheria Scarlet fever Meningitis	6 3 1 1 1 1 1 2 4 1 1 1 1	Cerebral embolus Shock following operation Sepsis following operation Fracture of skull from fall Acute intestinal obstruction Abscess rupturing in lung Amyloid degeneration (uraema) Paralysis and multiple abscesses Congenital lues—tumor of hip Inanition Total	1 1 1 1 1 1 1 1 34
Meningitis Gastro duodenitie	1.	Total	34

REPORT OF SURGEON IN CHARGE.

December 1, 1908.

To the State Board of Control.

Gentlemen: While Minnesota was the first state in the Union to appropriate money for the care and cure of crippled and deformed children, the other states which have followed our example have rather surpassed us in one respect. That is they have realized the importance of establishing industrial schools for those not amenable to treatment, and also for children who are cured in a hospital and have no home to go to, or who are suffering from a disease which can only be improved, such, for instance, as infantile paralysis, where we only get them to walk by the aid of braces, and sometimes only by the use of crutches. This, of course, is a great improvement, but we must always keep in mind that we are treating indigent children, children whose parents or guardians are unable to give them any further industrial education after they return home.

You would be surprised to know how many cases apply to us for treatment, for whom we can do nothing in a medical or surgical way, and who are bright and ambitious, not only willing but anxious to learn some kind of a trade or occupation which will render them independent and happy.

It is to be regretted that no exact record has been kept of the number of patients applying to us for relief, who have been rejected because nothing could be done for them in the way of treatment. They are incurable, and yet suffering from a disease which is not fatal. I refer to paralysis, partial or complete of the arms, or legs, or the loss of one or more extremities.

One case in particular is brought to mind of a young man who had lost all power over his lower limbs. Nothing could be done for him in a remedial way, and yet he was bright, had good use of his body and arms. What a pitiful expression his face wore when he was told that nothing could be done for him, and he asked, "Is there no place for me? If I could only be taught to do stenography, typewriting or anything rather than go back to my town again with absolutely nothing to do." When asked about his taking up some occupation which would not only help to pass away the time but be of renumerative value, his answer was, "I have no money to spend to learn any trade."

A peculiar coincidence brought this industrial school to my mind. A poor fellow was brought to St. Paul by friends. He had lost both of his hands. He had come to St. Paul under the impression that there was a place here where he could learn some trade. At first thought one would ask, "What could he do if there were an industrial school for indigent cripples?" Whether by coincidence or providentially, that very day a young man whose parents are able to provide for him came to St. Paul exhibiting a most beautiful rug which he had woven, and this boy was born without hands.

There are many individual cases in mind of children who are at present helpless cripples, who are helpless not only physically but financially, for whom the state has made no provision whatever. An industrial school for cripples would educate these as they are educated and cared for in England, Ireland, Philadelphia and Massachusetts. We could teach them typewriting, typesetting, basket making, carpet and rug weaving, dress making, plain sewing, shoe making and all kinds of leather work, tailoring, clay modeling, and for the girls, dressmaking, millinery, cooking, baking, housekeeping, etc. For those tuberculously inclined we could teach farming, gardening, floriculture, care of poultry and dairying.

For all this we are beautifully provided with land which was given us by the citizens of St. Paul, for it is not only land enough to enable us to carry on the work mentioned above, but from a standpoint of health, is most beautifully situated, and close enough to a large city to enable us to dispose of their goods and products.

In the industrial school we will not only be adding to their happiness, but to their health, and from a practical standpoint making a self-supporting citizens out of a class which would otherwise be paupers.

Further, the industrial school once established, very little extra expense will be necessary, for as you know, we own the land, and not only may the patients be made self supporting, but the institution itself can be made self sustaining.

In our hospital report you will notice the tremendous number of cases suffering from tuberculosis. We only mention in this report their tuberculous deformities, but almost all of these give evidence of tuberculosis elsewhere in their bodies, so that we do not only have to cure the local tuberculosis, but the general tuberculosis as well. In fact, with the exception of a few congenital deformities every deformed child brought to us requires treatment for his general health, for they are poorly nourished and weak and anaemic. Many times even in cases of congenital deformities, months of general treatment are required before we dare attempt any treatment to remedy the deformity. This is the reason many of these children remain here so long. In fact, if this were not true possibly the State Hospital for Indigent Crippled and Deformed Children would not be necessary.

Simply reading our report gives but little idea of the work being done by the state hospital. To have any conception of the practical good of the institution one should have a more intimate knowledge, see the children when they enter and again when they are discharged, then only will the terms "cured" and "improved" have any meaning beyond that of statistics. For example, the term 'cured' means that children who are brought to the hospital deformed and diseased are restored not only to health, but are completely relieved of their deformity. The term "improved" in many instances gives no idea of the good accomplished because of its broad application, for instance children with deformed limbs as a result of partial paralysis or diseased joints come to the hospital unable to walk at all; again some enter able to walk with the aid of crutches; these cases are treated and the deformity overcome; they leave the institution able to walk but still wearing some simple mechanical support. Our report reads: "discharged improved," but they have improved to such an extent that they are able to walk and run about without the aid of crutch or cane. Some of them ultimately recover, they are simply discharged, as they do not require further hospital treatment, and so do not appear again on our reports.

Sometimes cases of tubeculous disease of the vertebrae are admitted with extreme deformity, suffering so much from the inflammatory condition of the spine that they are weakened to such an extent that they are unable to walk. The inflammation is cured, they are relieved of their pain, but the deformity of the spine is only partially reduced. In other words, they are completely restored to health, but because of this slight deformity remaining they are discharged "improved."

We cannot refrain from expressing hearty appreciation of the personal interest in the children shown by your honorable body, and from expressing our gratitude to Doctors Ancker, Colvin. Dennis, Ramsey, McDavitt and Dunning for their willingness to sacrifice their private affairs to assist in treating these children, to the house surgeons, and to Mrs. Campbell for their untiring efforts to carry out the details of treatment, and to Miss Edwards for her self-imposed duty of looking after the personal wants of the children and contributing to their happiness by parties, picnics, rides, etc. In fact everyone upon whom we have called for any kind of assistance has shown much willingness to aid in the work.

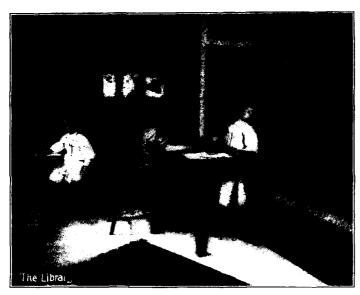
Respectfully submitted,

ARTHUR J. GILLETTE, Surgeon in Charge.

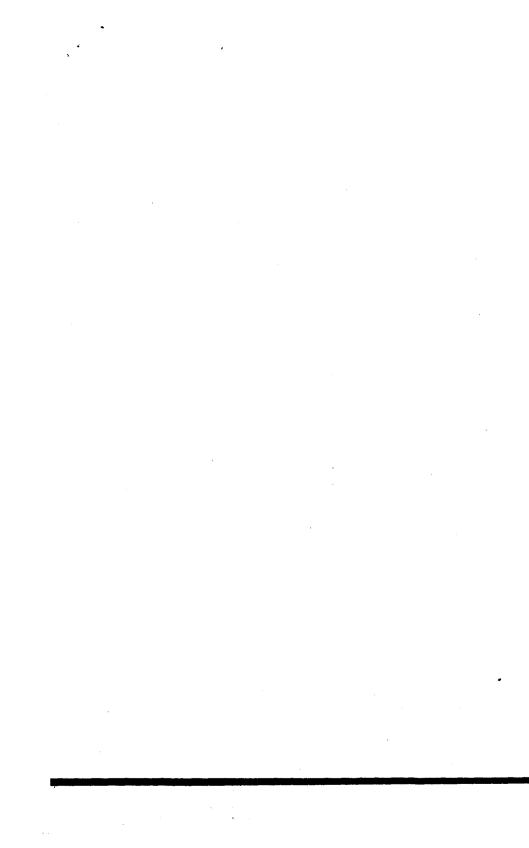
HOSPITAL REPORT OF MINNESOTA STATE HOSPITAL FOR CRIPPLED AND DEFORMED CHILDREN, TO DECEMBER 1, 1908.

Report of Cases Treated in the Hospital	Number of Cases	Discharged Cured	Discharged improved	Discharged	Not treated	Died	Is the Hospital Dec. 1st, 1908
Single tuberculous disease of the hip joint	78 9 57 11	37 5 19	15 1 15 5	1		6 2 9 1	18 12 1
Tuberculous disease of the knee joint. Septic disease of knee and hip joints. Lateral curvature of the spine. Double congenital club foot.	26 1 17	2	1 9	····i	1 		
Single congenital club foot	28 24 29 5	22 5	18		2 	2	i
Single congenital dislocation of the hip. Double congenital dislocation of the hips. Flexion of knee and club foot due to infantile paralysis	9 5	2	6				3
alysis Tuberculous disease of the sacro-iliac joint. Tuberculous disease of the shoulder joint. Curved spine, both forearms curved, both thighs	2 1	1					
curved, both legs deformed due to rickets Anterior curvature of thighs, flat foot and pigeon breast due to rickets Deformity of knee due to osteomyelitis	3 4		 1 1				
Knock-knee Spastic club foot and club hand Congenital wry neck	4 7 1	2					1
Congenital shortening of femur, tibia and lateral curvature of spine	1 6	j i	1	 			2
Bow legs, anterior curvature of thighs and posterior curvature of spine due to rickets	3 2	2	1				···i
and of the frontal bone	1	1	1				
Delayed union of fractured thigh	1	i	i	 			
Double knock-knees, anterior curvature of thighs and coxa vara due to rickets Deformity of hands and feet due to rickets (tetany).	2	1				1	
Hare lip Tuberculous disease of the vertebrae with paralysis and tuberculous ankle. Double congenital club foot, congenital shortening of	1	1				1	
the humeri, and congenital absence of patella Suppurative epiphysitis of femur at knee joint Tuberculous disease of vertebrae and hand	1 4	2	····i			1	···i
Tuberculous disease of the foot. Tuberculous disease of the vertebrae and of the knee Tuberculous disease of the elbow joint. Inflammation of the hip following typhoid fever	1 6	1 1	1			i	1
Cleft palate	1	1				i	
Deformity of hips and back due to infantile paralysis Deformity due to intra capsular fracture of hip Deformity following burns. Hare lip and cleft palate	6	1 2	<u>i</u>			i	i
Tuberculous disease of spine and of hip joint Tuberculous disease of the ankle joint Congent double club feet, club hands and flexed		5			::::	::::	::::
knees Other deformities Deformity and paralysis of hand due to fracture of elbow	. 8	j		1	2		i





STATE HOSPITAL FOR CRIPPLED AND DEFORMED CHILDREN.



HOSPITAL REPORT OF MINNESOTA STATE HOSPITAL FOR CRIPPLED AND DEFORMED CHILDREN, TO DECEMBER 1, 1909—Continued

Report of Cases Treated in the Hospital	Number of Cases	Discharged Cured	Discharged improved	Discharged unimproved	Not Treated	Died	In the Hospital Dec. 1st, 1908
Weak spine Double club feet, paralysis of lower limbs and curved spine	2	2)		 		
Pronated flat foot. Osteomyelitis of right and left thighs and dislocated hip	3						1
Multiple suppurative arthritis. Tubercular disease of vertebrae, wrist and elbow Deformities due to Friedreich's ataxia Flexed knee due to removal of patella. Webbed fingers of both hands Flexed thighs due to iliac aneurism.	5 1 1 1 1	1 1 1	1			1	
Double knock-knee, double club foot and spastic par- alvais	1		1)	i)	 	
Tuberculous disease of wrist, shoulder, knee and leg Curvature of spine and flat foot	1 1 2		1)	
ills Osteomyelitis of tibia and fracture of tibia. Osteomyelitis of femur and anterior curvature of femur	1					[]	
Bow legs	6		2			 	2
tibia due to rickets	1		1				
thighs Congenital club hand, deformity and shortening of legs and thighs and absence of patella Tuberculous disease of both hips, of ankle joint and	_						1
of tibia Osteomyelitis of shoulder, humerus and of elbow Rickets cretinism and myocarditis	1 1 1	1			 	ii	
Double knick-knee, flat foot and anterior curvature of both tibla and femora	1 1	1	 	ļ		i	
Tuberculous disease of spine, of the foot and a her- nia	1 3			ļ		 1	
Congenital syphilis and tumor of the hip	1	i		1		1	
Septic shoulder Flexed knee due to trauma Cerebral palsy, spastic paralysis and epilepsy Coxa yara due to malunion of fracture	Ī		<u> </u> ::::]····i	l	1	1
Flexed knees and adducted thighs due to cerebral palsy	1 1	 	 ::::			::::	1
Hip joint disease, osteomyelitis and paralysis of lower extremities due to acute infection	1	 					1
·	463	206	133	1:	2	34	74

^{. (}The term "improved" does not convey to any but those actually in contact with the work the benefit accomplished; for instance, a case may be relieved of all pain and every evidence of active disease and the patient able to walk, but because of slight physical defect it is discharged "improved.")

RECORD OF DEATHS.

	Cause of Admission.	Cause of Death.
1	Tuberculous disease of the hip joint	General tuberculosis.
1		Measles.
	Tuberculous disease of the hip joint	
1	Tuberculous disease of the hip joint	
1	Double tuberculous disease of hip joint	general tuberculosis. Tuberculous meningitis.
	Double tuberculous disease of hip joint	Shock following operation.
		Meningitis.
		Acute intestinal obstruction.
	Tuberculous disease of vertebrae	
		Abscess ruptured into lung.
	Tuberculous disease of vertebrae	Amyloid kidneys and general
•	Indicate alocate of telephacianing	tuberculosis.
1	Tuberculous disease of vertebrae	Amyloid degeneration and
_		uraemia.
1	Tuberculous disease of vertebrae	Paralysis with multiple ab-
_		scesses.
1	Tuberculous disease of vertebrae	Potts disease and complica-
_		tions.
1	Tuberculous disease of vertebrae with paralysis	General tuberculosis.
1	Paralytic club foot	Diphtheria.
		Scarlet fever.
1	Tuberculous sacro lilac joint disease	Tuberculous disease of sacro
		iliac joint and multiple ab-
		scesses.
1		Gumma of brain.
1	Double knock knee and anterior curve of femur.	Broncho pneumonia.
1	Tuberculous disease of ankle and vertebrae with	Tuberculous meningitis.
•	paralysis	
- 1	Tuberculous disease of knee joint and vertebrae.	General tuberculosis.
		Sepsis following operation.
1		Fracture of skull from fall.
i	Deformity from burns	Gastro duodenitis.
i	Rickets, cretinism and myocarditis	Diphtheria and myocarditis
î	Hip disease, osteomyelitis and septic foot	Shock following operation
ī	Iliac aneurism	Cerebral embolus.
		Inanition and broncho pneu-
_		monia.
1	Congenital syphilis and tumor of hip	Congenital syphilis and tumor
_	` '	of hip.
34		-

ARTHUR J. GILLETTE,

Surgeon in Charge.

State Public School

REPORT OF THE

BOARD OF MANAGERS AND SUPERINTENDENT

FOR THE

Biennial Period Ending July 31, 1908

State Board of Control, St. Paul, Minn.

Gentlemen: I herewith respectfully submit the twelfth biennial report of the State Public School for dependent and neglected children.

Yours truly,

GALEN A. MERRILL, Superintendent.

MOVEMENT OF POPULATION, COST, ETC.

August 1, 1906, to July 31, 1907. Present August 1, 1907	August 1, 1907 to July 31, 1908. Present August 1, 1907
Sy order Count 1 1	Returned from trial— Boys
Total number cared for	Total number cared for
Cost per capita, average daily attendance	Cost per capita, average daily attendance

NOTICE: This material may be protected by acceptable law

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